



MEASLES MORTALITY REDUCTION AND REGIONAL MEASLES ELIMINATION

WHAT IS THE PUBLIC HEALTH PROBLEM?

- Measles caused an estimated 777,000 deaths worldwide in 2000. Globally, measles is the leading cause of childhood death from a vaccine-preventable disease.
- In 1989–1991, a measles outbreak affected more than 55,000 Americans; 123 persons died. Low coverage rates, at the time, of pre-school children in large urban areas contributed significantly to the spread of the disease.
- The United States remains at risk of importation of measles from countries that have not yet eliminated the disease. A total of 37 confirmed measles cases were reported in the United States in 2002.

WHAT HAS CDC ACCOMPLISHED?

- The Western Hemisphere is close to stopping the spread of endemic measles, demonstrating the effectiveness of current control strategies in a large geographic area.
- During 2002, the number of confirmed measles cases reported in the Western Hemisphere totaled 2,572. The majority of these cases occurred in Venezuela and Colombia, while the remaining cases were imported from endemic countries outside of the Western Hemisphere.
- Success in measles-control efforts is a result of the >90% routine measles vaccination coverage achieved among children by age 1 year, combined with successful catch-up and follow up campaigns implemented in the Western Hemisphere since 1988.
- In fiscal year 2002, CDC contributed approximately \$28 million in grants and other scientific and technical assistance to control measles globally. CDC made grants to the Pan American Health Organization (PAHO) to eliminate measles from the Western Hemisphere, and to the Measles Partnership – a joint effort by the American Red Cross/The International Federation of Red Cross and Red Crescent Societies, WHO, UNICEF, the United Nations Foundation and CDC – to reduce measles related mortality in Africa. To date the Partnership has immunized over 20 million children and prevented an estimated 140,000 deaths in Africa.
- CDC provides epidemiologic and laboratory assistance for disease tracking, vaccine for outbreak control and other supplementary immunization activities, and short- and long-term assignments of CDC scientific staff to priority countries.

Examples of program in action: CDC provided scientific, technical, and programmatic support for measles outbreak investigation and control activities in Venezuela, Colombia, Ecuador and Peru in 2002. CDC staff assisted in the implementation and monitoring of mass campaigns in these countries, and in the conduct of outbreak investigations in Venezuela and Colombia. These efforts contributed to the interruption of measles transmission in the Western Hemisphere in the fall of 2002.

WHAT ARE THE NEXT STEPS?

In 2003, CDC and its partners will continue to apply current measles control strategies to maintain elimination of measles in the Western Hemisphere. CDC will promote PAHO strategies in Africa and other regions to reduce mortality from measles and to stop endemic measles transmission in WHO regions with a measles elimination goal.

For more information on this and other CDC programs, visit www.cdc.gov/programs.

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